

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814



April 12, 1988

ALL COUNTY INFORMATION NOTICE NO. 1-23-88

To: ALL COUNTY WELFARE DIRECTORS

SUBJECT: NOTICE OF PARTICIPATION PROBLEM AND PROPOSED PLAN TO RESOLVE IT
(CONCILIATION PLAN - RS 39)

REFERENCE: ALL-COUNTY LETTER NO. 87-125

This letter is to provide County Welfare Departments (CWDs) with the revised RS 39, "Notice of Participation Problem and Proposed Plan to Resolve It (Conciliation Plan)" form (enclosed) which must be used by the CWDs to notify a mandatory Refugee Cash Assistance/Refugee Demonstration Project recipient of the participation problem which may result in their aid being stopped or reduced.

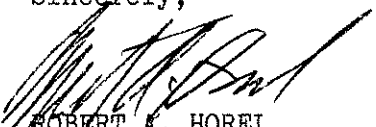
The RS 39 was revised to be more consistent with the current conciliation format used in the Aid to Families with Dependent Children/Work Incentive Program. There is one major revision located on page 2 where a section has been added for a final conciliation plan. The final plan is completed when a plan is developed by the CWD and the client which is different from the "CWD Conciliation Plan" or "Your Proposed Conciliation Plan".

The minor revisions are results of rearranging language on the existing form (i.e., the Legal Advice Available section is now located at the bottom of page 1, all the proposed plan sections are now on page 2, etc.).

The form is available in two duplicate sets attached by a second stub for all parts. Parts 1 and 2 print identical, and parts 3 and 4 print identical. Before completing the form, you will need to separate part 1 and 2 from part 3 and 4. The revised RS 39 will be available for ordering from the Department of Social Services Warehouse when the current stock of RS 39 forms is depleted. The translated versions of this form will be sent to you at a later date.

Any questions concerning the RS 39 should be directed to your Refugee Operations Analyst at (916) 323-2131.

Sincerely,


ROBERT A. HOREL
Deputy Director
Welfare Program Division

Enclosure

cc: CWDA

NOTICE OF PARTICIPATION PROBLEM AND PROPOSED PLAN TO RESOLVE IT (CONCILIATION PLAN)

DISTRIBUTION: WHITE COPIES: CLIENT
YELLOW COPIES: CWD CASE FILE

<input type="checkbox"/> RCA	<input type="checkbox"/> RDP
MAILING DATE	
CASE NUMBER	
CWD ADDRESS	

There is a problem with your taking part in the Refugee Cash Assistance Program (RCA)/Refugee Demonstration Project (RDP). You did not participate or cooperate, and the CWD found that you did not have a good reason.

In order to fix this problem and continue to receive cash aid, you are to come for an interview on _____ at _____ at the CWD address shown above.

The reason for the interview is to agree on a plan to fix the problem by making a plan of action. This is called a Conciliation Plan. At the interview, we want to talk about the problem that you:

- ☐ Failed to go to training on: _____
- ☐ Failed to go to a job interview on _____
- ☐ Did not take a job at _____ when referred on _____
- ☐ Failed to go to the _____ worker when told to go.
- ☐ Did not accept referrals to employment interviews.
- ☐ Other _____

If you cannot go to this interview call _____ at _____ to set up another interview. If we can not talk with you, please leave a message and we will get back to you.

If you do not come in for the interview or call by _____, you will get a notice of action in the mail and your family's cash aid will be stopped or lowered.

LEGAL ADVICE AVAILABLE

You can get free help about this problem and the Plan, including help with your own Plan, if you wish to give us one from your local welfare rights office or legal aid office at these addresses:

COUNTY WELFARE DEPARTMENT CONCILIATION PLAN

You can fix the problem by agreeing to take part in this plan. Our proposed Conciliation Plan for you is:

YOUR PROPOSED CONCILIATION PLAN

Our proposed Conciliation Plan will work. We will be glad to consider a Plan that you think will also work. Please tell us your Plan:

YOUR FINAL CONCILIATION PLAN

PLEASE ANSWER ONE OF THESE QUESTIONS — Thank You

- ☐ I agree with the County Welfare Department Conciliation Plan.
- ☐ I do not agree with the County Welfare Department Conciliation Plan and I have suggested my own Plan.
- ☐ I do not want to take part in RCA/RDP or agree to a Conciliation Plan, even though I understand that this will result in the lowering or stopping of my welfare benefits.

YOUR SIGNATURE

DATE

CWD REPRESENTATIVE

MAILING DATE

WHAT HAPPENS IF YOU DO NOT CONTACT US BY THE INTERVIEW DATE

If we do not hear from you, the county will think that you did not want an interview and will think that you do not want to take part in conciliation. A Notice of Action will be sent to you and your family's cash aid will be stopped or lowered.